

FILED
U.S. BANKRUPTCY COURT
2012 DEC -5 P 4:48
COURT USE ONLY
S.D. OF N.Y.

B 5 (Official Form 5) (12/07) - Page 2

Name of Debtor Budget Travel

Case No. _____

TRANSFER OF CLAIM

☐ Check this box if there has been a transfer of any claim against the debtor by or to any petitioner. Attach all documents that evidence the transfer and any statements that are required under Bankruptcy Rule 1003(a).

REQUEST FOR RELIEF

Petitioner(s) request that an order for relief be entered against the debtor under the chapter of title 11, United States Code, specified in this petition. If any petitioner is a foreign representative appointed in a foreign proceeding, a certified copy of the order of the court granting recognition is attached.

Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

☒ SEE FOLLOWING PAGE FOR SIGNATURE

Signature of Petitioner or Representative (State title)
Ryan Murphy 12/03/2012
Name of Petitioner Date Signed

Name & Mailing
Address of Individual
Signing in Representative
Capacity
Ryan Murphy
42-10 82nd St. #2K
Elmhurst, NY 11373

☒ Signature of Attorney Date

Name of Attorney Firm (If any)

Address

Telephone No.

☒ SEE FOLLOWING PAGE FOR SIGNATURE

Signature of Petitioner or Representative (State title)
Stuart Wald 11/30/2012
Name of Petitioner Date Signed

Name & Mailing
Address of Individual
Signing in Representative
Capacity
Marketshows Inc., 9070
Kimberely Blvd, Ste. 27
Boca Raton, FL 33434

☒ Signature of Attorney Date

Name of Attorney Firm (If any)

Address

Telephone No.

☒ SEE FOLLOWING PAGE FOR SIGNATURE

Signature of Petitioner or Representative (State title)
Amanda Marsalis Photography Inc. 12/03/2012
Name of Petitioner Date Signed

Name & Mailing
Address of Individual
Signing in Representative
Capacity
Amanda Marsalis
1519 Allesandro St
Los Angeles, CA 90026

☒ Signature of Attorney Date

Name of Attorney Firm (If any)

Address

Telephone No.

PETITIONING CREDITORS

Name and Address of Petitioner	Nature of Claim	Amount of Claim
<u>Ryan Murpy, 42-10 82nd St. #2K, Elmhurst, NY 11373</u>	<u>unpaid invoices</u>	<u>3,470.00</u>
<u>Stuart Wald, 9070 Kimberely Blvd, Ste. 27, Boca Raton FL</u>	<u>unpaid invoices</u>	<u>7,013.15</u>
<u>Amanda Marsalis, 1519 Allesandro St, LA CA 90026</u>	<u>unpaid invoices</u>	<u>4,500.00</u>
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims
		<u>14,983.15</u>

3 continuation sheets attached

B 5 (Official Form 5) (12/07) - Page 2

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x Ryan Murphy
Signature of Petitioner or Representative (State title)
Name of Petitioner Ryan Murphy Date Signed 12-03-12

Name & Mailing
Address of Individual
Signing in Representative
Capacity

x _____
Signature of Attorney Date

Name of Attorney Firm (If any)

Address

Telephone No.

x _____
Signature of Petitioner or Representative (State title)

Name of Petitioner Date Signed

Name & Mailing
Address of Individual
Signing in Representative
Capacity

x _____
Signature of Attorney Date

Name of Attorney Firm (If any)

Address

Telephone No.

x _____
Signature of Petitioner or Representative (State title)

Name of Petitioner Date Signed

Name & Mailing
Address of Individual
Signing in Representative
Capacity

x _____
Signature of Attorney Date

Name of Attorney Firm (If any)

Address

Telephone No.

PETITIONING CREDITORS

Name and Address of Petitioner <u>Ryan Murphy</u> <u>42-10 82nd St. 2K</u> <u>Elmhurst, NY 11373</u>	Nature of Claim <u>Overdue invoices</u>	Amount of Claim <u>\$ 3470.00</u>
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Name and Address of Petitioner	Nature of Claim	Amount of Claim
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Name and Address of Petitioner	Nature of Claim	Amount of Claim
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Total Amount of Petitioners' Claims

continuation sheets attached

B 5 (Official Form 5) (12/07) - Page 2

Name of Debtor Budget Travel

Case No. _____

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TRANSFER OF CLAIM

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Stuart Wald V. P.
Signature of Petitioner or Representative (State title)

Stuart Wald
Name of Petitioner
Date Signed 11/30/2012

Name & Mailing
Address of Individual
Signing in Representative
Capacity
Markeshows, Inc., 9070
Kimberely Blvd, Ste 27,
Boca Raton, FL, 33434

x
Signature of Attorney
Date

Name of Attorney Firm (If any)

Address

Telephone No.

x
Signature of Petitioner or Representative (State title)

Name of Petitioner
Date Signed

Name & Mailing
Address of Individual
Signing in Representative
Capacity

x
Signature of Attorney
Date

Name of Attorney Firm (If any)

Address

Telephone No.

x
Signature of Petitioner or Representative (State title)

Name of Petitioner
Date Signed

Name & Mailing
Address of Individual
Signing in Representative
Capacity

x
Signature of Attorney
Date

Name of Attorney Firm (If any)

Address

Telephone No.

PETITIONING CREDITORS

Name and Address of Petitioner

Stuart Wald, 9070 Kimberly Blvd, Ste 27, Boca Raton, FL

Nature of Claim
unpaid invoice

Amount of Claim

7,013.15

Name and Address of Petitioner

Nature of Claim

Amount of Claim

Name and Address of Petitioner

Nature of Claim

Amount of Claim

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Total Amount of Petitioners' Claims

continuation sheets attached

B 5 (Official Form 5) (12/07) - Page 2

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Amanda Marsalis

Signature of Petitioner or Representative (State title)

Amanda Marsalis Photography Inc.

12/3/12
Date Signed

Name of Petitioner

Name & Mailing

Address of Individual

Signing in Representative

Capacity

1519 Alessandro St
Los Angeles, CA 90026

x

Signature of Attorney

Date

Name of Attorney Firm (If any)

Address

Telephone No.

x

Signature of Petitioner or Representative (State title)

Name of Petitioner

Date Signed

Name & Mailing

Address of Individual

Signing in Representative

Capacity

x

Signature of Attorney

Date

Name of Attorney Firm (If any)

Address

Telephone No.

x

Signature of Petitioner or Representative (State title)

Name of Petitioner

Date Signed

Name & Mailing

Address of Individual

Signing in Representative

Capacity

x

Signature of Attorney

Date

Name of Attorney Firm (If any)

Address

Telephone No.

PETITIONING CREDITORS

Name and Address of Petitioner

Amanda Marsalis 1519 Alessandro St. LA CA 90026

Nature of Claim

Overdue Invoices

Amount of Claim

\$4500

Name and Address of Petitioner

Nature of Claim

Amount of Claim

Name and Address of Petitioner

Nature of Claim

Amount of Claim

Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.

Total Amount of Petitioners' Claims

continuation sheets attached